

# 2018 Summer Horsemanship Camp Application

June 18-22, 9 am to noon Monday-Thursday and 9 am to 11 am Friday,, Seven Oaks Ranch, 199<sup>th</sup> & Pflumm in Spring Hill, KS

Camper's name: \_\_\_\_\_ Boy or girl (circle one)

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Parent(s) names: \_\_\_\_\_

Phone (home & cell, please): \_\_\_\_\_

Email (both parents): \_\_\_\_\_

Camper's age: \_\_\_\_\_ Grade in school: \_\_\_\_\_

Camper's riding experience: \_\_\_\_\_

Physical limitations (if any): \_\_\_\_\_

Medications needed at camp: \_\_\_\_\_

Who, besides parents, may pick up after camp? \_\_\_\_\_

I acknowledge that horseback riding is an inherently dangerous domestic animal activity as defined by Kansas law, and I understand that there is limited liability for any injuries, including those resulting in death, under Kansas equine limited liability law. I accept all responsibility for any injuries or death resulting from my child's participation in Seven Oaks Ranch Summer Horsemanship Camp. I understand that I will be required to sign a Release of Liability as a condition of my child's participation in this camp. I understand that my child will be required to abide by the rules of Seven Oaks Ranch and summer camp. I understand that, if my child does not obey these rules, his/her participation in summer camp may be terminated and I will not receive a tuition refund.

\_\_\_\_\_  
Parent of Camper (sign here) Date \_\_\_\_\_ Please print name here

\_\_\_\_\_  
Parent of Camper (sign here) Date \_\_\_\_\_ Please print name here

Please attach your check in the amount of \$300 for the week, or your \$150 non-refundable deposit to hold your space for the week, and mail with completed application to: Daphne Thornton, 9154 Riggs Lane, # E, Overland Park, KS, 66212. If you need more information, feel free to call Daphne at 816-507-5928 or Dana at 515-441-9403. Please make your checks payable to Dana McCullough.